

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000521

FILED
Apr 16, 2009
Secretary of State

Entity Name: ANDRITZ SEPARATION INC.

Current Principal Place of Business:

1010 COMMERCIAL BOULEVARD SOUTH
ARLINGTON, TX 76001 US

New Principal Place of Business:

Current Mailing Address:

C/O ANDRITZ (USA) INC.
1115 NORTHMEADOW PKWY
ROSWELL, GA 30076 US

New Mailing Address:

FEI Number: 59-3773483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HOFMANN, FRANZ
Address: STATTEGGER STRASSE 18
City-St-Zip: GRAZ, AU A8045 AU

Title: VC () Delete
Name: KAPPEL, JOHANNES
Address: STATTEGGER STRASSE 18
City-St-Zip: GRAZ, AU Z8045 AU

Title: D () Delete
Name: RYAN, TIMOTHY J
Address: 1115 NORTHMEADOW PKWY
City-St-Zip: ROSWELL, GA 30076 US

Title: P () Delete
Name: MADDEN, JOHN
Address: 1010 COMMERCIAL BLVD. SOUTH
City-St-Zip: ARLINGTON, TX 760017130 US

Title: VP () Delete
Name: HUFF, STEVE
Address: 1010 COMMERCIAL BLVD SOUTH
City-St-Zip: ARLINGTON, TX 76001 US

Title: TR () Delete
Name: CROSSMANN, ANN
Address: 1010 COMMERCIAL BLVD SOUTH
City-St-Zip: ARLINGTON, TX 76001 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH B. ZINK

MRS.

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date